

**REQUEST FOR EXTENSION OF TIME
TO FILE PROPERTY STATEMENT**STATE OF CALIFORNIA
BOARD OF EQUALIZATION

ASSEESSEE'S NAME	SBE NO.	LIEN DATE (year)
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ASSEESSEE'S ADDRESS (street, city, state, and zip code)

CONTACT PERSON'S NAME	CONTACT'S DAYTIME TELEPHONE NO. ()
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☐ First Request for Extension ☐ Second Request for Extension

PROPERTY STATEMENT PARTS	EXTENSION DATE REQUESTED	APPROVED (yes/ no)	EXTENSION DATE GRANTED
Tangible Property List			
Summary Control			
Statement of Land Changes			
Financial Schedules			
Schedules of Leased Equipment			
Studies and other voluntary information (specify)			
Other requested information (describe below)			

Reason for extension request (R & T Code section 830.1 requires a showing of good cause):

An extension is not automatically granted. You will be notified by mail whether the extension is granted or denied. If granted, the notice will state the date to which the extension has been granted.

☐ **FAXED REQUEST to fax number: (916) 324-2787** (If request is faxed, it must be followed by a hard copy through regular mail.)
CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing and all information herein, including accompanying statements or documents, is true and correct and complete to the best of my knowledge and belief. If the owner is a corporation, this document must be signed by an officer of the corporation.

APPLICANT'S SIGNATURE 	DATE
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FOR BOARD USE ONLY

APPROVAL OR DISAPPROVAL BY BOE VALUATION DIVISION CHIEF

☐ Approved as noted ☐ Disapproved

VALUATION DIVISION CHIEF'S SIGNATURE 	DATE
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Comments: _____

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